

HEALTH FACILITIES

The Tennessee Certificate of Need program is administered by the Health Facilities Commission under the authority of Tennessee Code Annotated Title 68, Chapter 11, Part 1, the Tennessee Health Planning and Resource Development Act of 1987.

This section of the code provides an outline of the categories and criteria that the Health Facilities Commission evaluates to determine whether to issue a Certificate of Need.

Certificate of Need Categories are:

- ☐ Nursing home and hospital facilities or services
 - Nursing home services
 - Swing bed services
 - Acute care bed need services
 - Comprehensive inpatient rehabilitation services
 - Neonatal nursery services
 - Burn units
 - Discontinuance of obstetrical services
 - Long-term care hospital bed need
 - Construction, renovation, expansion, and replacement of health care institutions
- ☐ Mental health and alcohol services
 - Psychiatric inpatient services
 - Intermediate Care Facility/Mental Retardation (ICF/MR) facilities
 - Mental health residential treatment facilities
 - Alcohol and drug abuse facilities
- ☐ Medical equipment and services
 - Extra-corporeal shock wave lithotripsy
 - Positron emission tomography (PET)
 - Magnetic resonance imaging (MRI)
 - Megavoltage radiation therapy services
- ☐ Home health and hospice services
 - Home health services

- Residential hospice services

- ☐ Special procedures
 - Open heart surgery services
 - Cardiac catheterization services
- ☐ Treatment and diagnostic centers
 - Ambulatory surgical services
 - Outpatient diagnostic centers

Certificate of Need Criteria:

- ☐ Need
 - Relationship of the proposal to any existing applicable plans
 - Population served by the proposal
 - Existing or certified services or institutions in the area
 - Reasonableness of the service areas
 - Special needs of the service area population, including the accessibility to consumers, particularly women, racial and ethnic minorities, and low-income groups
 - Comparison of utilization/occupancy trends and services offered by other area providers
 - Extent to which Medicare, TennCare, and medically indigent patients will be served by the project
- ☐ Economic factors
 - Whether adequate funds are available to the applicant to complete the project
 - Reasonableness of the proposed project costs
 - Anticipated revenue from the proposed project and the impact on existing patient charges
 - Participation in state/federal revenue programs
 - Alternatives considered
 - Availability of less costly or more effective alternative methods of providing the benefits intended by the proposal